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<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b> <b>FY 2009</b> <i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i>		Docket Number (Optional) 55670DIV(45858)
Application Number	10/600,584-Conf. #5497	Filed June 19, 2003
For ARCHIVING OF VECTORS		
Art Unit 1631	Examiner J. S. Brusca	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.		
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):		
	Fee	Small Entity Fee
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$130	\$65
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$490	\$245
<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1110	\$555
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1730	\$865
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2350	\$1175
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. <input type="checkbox"/> A check in the amount of the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>04-1105</u> .		
<b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>		
I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>34,901</u> <input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 <u>Kathryn A. Piffat, Ph.D.</u> _____ _____ _____		
<u>Kathryn A. Piffat, Ph.D., Esq.</u> _____ _____ _____		<u>March 23, 2009</u> _____ _____ _____
_____ _____ _____		_____ _____ _____
<small>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</small>		
<input type="checkbox"/> Total of <u>1</u> forms are submitted.		

03/25/2009 CCHAU1 00000059 041105 10600584

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Approved for use through 03/31/2009. OMB 0651-0031

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Registration number if acting under 37 CFR 1.34 <u>Kathryn A. Piffat, Ph.D.</u>				
Signature <u>Kathryn A. Piffat, Ph.D.</u>				
March 23, 2009 Date				
Kathryn A. Piffat, Ph.D., Esq. Typed or printed name				
(617) 517-5516 Telephone Number				
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